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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

12

Application Number

10/772,529

Filing Date

February 4, 2004

First Named Inventor

Robert N. BLAIR

Art Unit

3736

Examiner Name

Not Yet Assigned

Attorney Docket Number

447582000700

ENCLOSURES (Check all that apply)

☒ Fee Transmittal Form + duplicate copy for fee processing - 2 pages☐ Fee Attached☐ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request - 1 page☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☒ Response to Missing Parts/Incomplete Application☒ Response to Missing Parts under 37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a Provisional Application☒ Power of Attorney, Revocation Change of Correspondence Address - 1 page☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) _____☐ After Allowance Communication to Group☐ Appeal Communication to Board of Appeals and Interferences☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please identify below):Copy of Notice to File Missing Parts, Part 2 - 2 pages
Declaration - 2 pages
Statement Under 37 CFR 3.73(b) with copy of Assignment - 3 pages
Return receipt postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

MORRISON & FOERSTER LLP
Mika Mayer - 47,777

(Customer No. 25226)

Signature

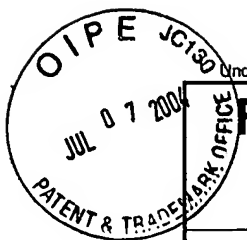
Date

July 7, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 335368638 US, in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 7, 2004

Signature:  (Tia B. Zimmerman)



FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>				Complete if Known																																																																																																																																																																																																																																															
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div><div>TOTAL AMOUNT OF PAYMENT (\$) 120.00</div></div>				Application Number		10/772,529																																																																																																																																																																																																																																													
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METHOD OF PAYMENT (check all that apply) <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP</div></div> <p>The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>				FEE CALCULATION (continued)																																																																																																																																																																																																																																															
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BASIC FILING FEE <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th colspan="2">Large Entity</th><th colspan="2">Small Entity</th><th rowspan="2">Fee Description</th><th rowspan="2">Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5" style="text-align: right;">SUBTOTAL (1)</td><td style="text-align: right;">0.00</td></tr></tbody></table>				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	Utility filing fee		1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					0.00	3. 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SUBMITTED BY Name (Print/Type) Mika Mayer Registration No. (Attorney/Agent) 47,777 Telephone (650) 813-4298 Signature Date July 7, 2004																																																																																																																																																																																																																																																			